



NEA Position on COVID-19 Vaccines
December 2020

NEA Resolution C-2, “Vaccinations” provides as follows:

The National Education Association believes that vaccines are essential medical tools in preventing infectious diseases. The Association acknowledges that vaccines must be pervasive to be effective.

The Association also believes that parents/guardians should follow vaccination guidelines from the American Academy of Pediatrics and Centers for Disease Control and Prevention. The Association further believes that state legislatures should establish clear guidelines for waivers that minimize the numbers of unvaccinated students to those necessary due to documented medical conditions. Evidence-based vaccination campaigns are integral in maintaining student and community health. (2015, 2016)

NEA’s 2016 resolution on vaccinations forms the basis for its position on COVID-19 vaccinations. The Centers for Disease Control and Prevention (CDC) includes “people who work in educational settings” as a group at “increased risk of acquiring or transmitting COVID-19” and thus one of the critical populations that should receive priority in initial phases when vaccine supply is limited.¹

NEA believes that educators should receive priority access to COVID-19 vaccines because of the importance of safe, equitable, and effective in-person instruction and support; and our members’ role in delivering nutrition, instructional materials, and remote instruction to our students even when school buildings are closed.

The NEA encourages widespread use of safe and effective COVID-19 vaccinations. We urge the Centers for Disease Control and Prevention (CDC) and governmental agencies at the county, state and federal levels to use consistent and transparent communications on the benefits and safety of vaccines.

We recognize that racial inequities have been made exponentially worse due to the cross-sector impacts of the pandemic and this will require us to stand and advocate with our students and their families. The CDC and other government agencies should consistently and explicitly acknowledge and communicate the disproportionate impact of COVID-19 on Black, Latinx, and Indigenous communities and take steps to ensure vaccines are readily accessible and available to

¹ CDC, “COVID-19 Vaccination Program Interim Playbook for Jurisdiction Operations,” (Oct. 29, 2020), available at https://www.cdc.gov/vaccines/imz-managers/downloads/COVID-19-Vaccination-Program-Interim_Playbook.pdf

our most impacted communities. Vaccine distribution planning and evidence-based vaccination campaigns must specifically address the disproportionate suffering in communities of color and must account for vaccine hesitancy based on historical abuses and exploitation of communities of color. Vaccine plans must also ensure equitable access to vaccines in rural and isolated communities.

NEA notes that, however effective and widely used COVID-19 vaccines are, mitigation measures (including face coverings, frequent hand washing, and physical distancing) to reduce the spread of the virus that causes COVID-19 will continue to be crucial. Given that studies of the efficacy and safety of a COVID-19 vaccine for use in children lag behind the approval of vaccines for adults, there is likely to be a period of time during which there are high vaccination rates for staff in schools, but students may not yet be able to receive a vaccine. In addition, the full effect of vaccines on transmission and reinfection is not yet clear. Therefore, ensuring the health and safety of the entire school community means that adherence to mitigation measures will continue to be important.